



Receipt

Atty. Docket No. 3379/3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Walter G. ANTOGNINI et al.
Appln. No. : 09/862,785 Examiner: To be assigned
Filed : May 18, 2001 Group Art Unit: 2165
Title : SYSTEM AND METHOD FOR DIGITAL BILL
PRESENTMENT AND PAYMENT

Application Processing Division's Customer Correction Branch
Assistant Commissioner for Patents
Washington, D.C. 20231

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REQUEST FOR CORRECTED FILING RECEIPT

We noticed errors in the title of the filing receipt for the application identified above. Please correct the following errors:

IN THE DOMESTIC PRIORITY DATA SECTION

After "11/24/1997", delete "ABN"; and

Change "6,098,882" to --6,176,427--.

A copy of the filing receipt with the changes noted thereon is enclosed.

Issuance of a corrected filing receipt is respectfully requested.

Respectfully submitted,

Dated:

November 27, 2001

Seth H. Ostrow

Reg. No.: 37,410

BROWN RAYSMAN MILLSTEIN

FELDER & STEINER LLP

900 Third Avenue

New York, New York 10022

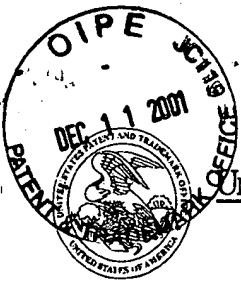
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Seth H. Ostrow



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/862,785	05/18/2001	2165	477	3379/3	8	4	4

CONFIRMATION NO. 9429

UPDATED FILING RECEIPT



OC000000007067053

Brown Raysman Millstein Felder & Steiner LLP
120 West Forty-Fifth Street
New York, NY 10036

Date Mailed: 11/14/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Walter Gerard Antognini, New York, NY;
Thomas Charles Antognini, Lexington, MA;

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A CON OF 08/977,510 11/24/1997-ABN-
WHICH IS A CIP OF 08/609,549 03/01/1996 PAT-6,098,882-6,176,427

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Foreign Applications

If Required, Foreign Filing License Granted 06/13/2001

Projected Publication Date: 02/21/2002

Non-Publication Request: No

Early Publication Request: No

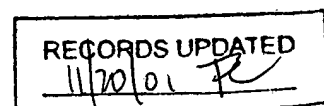
** SMALL ENTITY **

Title

System and method for digital bill presentment and payment

Preliminary Class

705



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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

CONFIRMATION NO. 9429

SERIAL NUMBER 09/862,785	FILING DATE 05/18/2001 RULE	CLASS 705	GROUP ART UNIT 2165	ATTORNEY DOCKET NO. 3379/3
APPLICANTS Walter Gerard Antognini, New York, NY; Thomas Charles Antognini, Lexington, MA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 08/977,510 11/24/1997 ABN * WHICH IS A CIP OF 08/609,549 03/01/1996 PAT 6,098,882 * (*) Data inconsistent with PTO records.				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 06/13/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY NY	SHEETS DRAWING 8	TOTAL CLAIMS 4
Verified and Acknowledged Examiner's Signature _____ Initials _____	INDEPENDENT CLAIMS 4			
ADDRESS Brown Raysman Millstein Felder & Steiner LLP 120 West Forty-Fifth Street New York ,NY 10036				
TITLE System and method for digital bill presentment and payment				
FILING FEE RECEIVED 477	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	